

North Dakota Medicaid Medical Advisory Committee (MMAC)¹

MMAC Charter

Article I - Purpose

The purpose of the MMAC is to provide a forum where the Department of Human Services (DHS) Medicaid program and its statewide partners, including health care providers, members and their families, and advocates, can:

1. Review and recommend changes to existing Medicaid policies.
2. Propose and discuss new Medicaid policies that are brought forth by the Department, statewide partners as well as the legislative and executive branch members and their staff.
3. Review and discuss proposed changes to the Medicaid state plan and waivers.
4. Provide and receive updates on key Medicaid initiatives or activities.
5. At the start of each biennium, review the quality, access, and expenditures of the Medicaid program of the prior biennium.

Article II - Composition

Composition of the MMAC should be designed to ensure that a diverse set of opinions and voices are heard. MMAC members should have sufficient experience with the Medicaid program so that discussions lead to learning and improvement of the program.

1. Number of Members and Representation

There shall be up to 25 members on the MMAC who will be appointed by the DHS Executive Director or designee. According to federal regulations, the members must include: a board-certified physician, members of consumer groups including Medicaid members or other consumer/advocacy groups, and the director of the public health or welfare department (or designee).

North Dakota MMAC members may also represent health care providers, trade associations, a member from each of the five recognized tribes, community/county partners, and staff from the Indian Affairs Commission.

Up to four members, two for each legislative chamber, of the MMAC will be suggested to the Medicaid Director by the Chairs of the North Dakota Senate and House of Representatives Human Services Committees. Chairs may suggest themselves to be members of the MMAC.

¹ MMAC authority is derived from Section 1902(a)(4) of the Social Security Act and the Code of Federal Regulations, 42 CFR 431.12

2. Responsibilities

MMAC members are expected to attend as many meetings as possible throughout the calendar year. If a MMAC member fails to attend three consecutive meetings without being excused, they shall be determined to have resigned.

3. Term Limits

The purpose of the MMAC is to represent a diverse group of participants and there should be no expectation that the same individuals will be included in perpetuity. Every four years the entire MMAC membership will be re-opened for nomination and existing MMAC members will have to reapply if they so choose. The composition of the MMAC will be determined by the DHS Executive Director or designee. MMAC service ends on December 31 of the applicable calendar year. For the current MMAC, members will be appointed in March 2020 and their term will end on December 31, 2024.

MMAC members of the legislature shall be decided between the Chairs of the Senate and House Human Services Committees and the DHS Executive Director or designee.

4. Provider and Beneficiary Liaisons

There shall be two lead liaisons to represent 1) providers and 2) members. The liaisons must be MMAC members and will be named at the first meeting of the calendar year. MMAC members who wish to serve as liaisons should denote this in their nomination to the Department. The term of the liaison positions is four years.

5. Vacancies

As current members end their MMAC term, there will be openings for new members. Openings will be announced at a MMAC, and nominees will have until one week prior to the next MMAC meeting to send an email with their desire to serve to the Medicaid Director or designee. At the subsequent meeting, the Medicaid Director or designee will announce the appointees. If a MMAC member cannot complete her/his duties within the course of the term, the organization that was represented by the vacating member (if applicable) may suggest a replacement. The replacement may finish out the term, but once the term is over, it is treated like any open seat.

Article III - Nomination

Potential MMAC members can self-nominate or be nominated by a colleague. The nominee or colleague shall send an email to the Medicaid Director or designee that briefly describes the nominee and why they should be a MMAC member. The description should clearly describe which partner group or individual perspective the nominee represents and their experience with Medicaid. If the nominee would like to be considered as the lead liaison for providers or members, this should be clear in the nomination.

Article IV - Meetings

All MMAC meetings are publicly noticed by DHS per public meeting guidance set by the state Attorney General. The dates for the MMAC are typically set for the entire calendar year at the start of the calendar year. Agendas will be provided a minimum of three business days in advance of the required notice. An email reminder will be sent to MMAC members about the upcoming meeting along with the agenda.

Regular MMAC meetings are scheduled four times per year. The DHS Executive Director or the Medicaid Director may call a special MMAC meeting at any time. If this occurs, the “special meetings” process for informing members and the public will be used.

At the end of each meeting, the Medicaid Director or designee will summarize the meeting’s content and highlight any actions that need to be taken by MMAC members or DHS staff.

Article V - Subcommittees

As deemed appropriate by the Medicaid Director, the MMAC may create subcommittees to address special topics or issues. For example, there could be a subcommittee created to address member issues. The subcommittee may or may not include members of the current MMAC but must be chaired by a current MMAC member. The subcommittee cannot have more members than the MMAC. The scope of work and the expectations of the subcommittee must be agreed upon by the Medicaid Director and the subcommittee chair.

Article VI – Review of Charter

The charter of the MMAC shall be reviewed at least every other year at the first meeting of each new biennium.